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## Canopy Co-Sleeper, Orlo, Play Title WITH A NEW POWER OF ATTORNEY Art Unit AND Williams, Janet Marie EXAMINET NAME Change of Correspondence address Accorney Docket Number 6240-13 I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted nerewith. OR I nereby appoint Practitioner(s) associated with the following Customer Number on mylour attentity(s) or agent(e) to prosecute the application identities above, and to transact all business in the United States Patent and Trademark Office connected therewith: I hereby appoint Practitionar(s) named bolow as my/our attempt(s) or agent(s) to prosecute the application identified above, and X to transact all business in the United States Patent and Trademark Office connected therewith: Registration Number Precitionar(s) Name 46,211 Richard C. O'Hare Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number. The eddress associated with Customer Number: Firm or $\mathbf{X}$ BEYERS COSTIN, P.C. Individual Name Address Post Office Box 575 Zlp | 95402-0878 Stele CA Cily Santa Rosa A.B.U rohare@bayerscostin.com Email Telephone (707) 547-2000 I am the: Applicant/Inventor. OR Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/RB/96) aubmitted herewith or filed on SIGNATURE OF Applicant or Assignee of Record 5/13/09 Date Signature (310) 457-9958 Tetaphone Name Sharch Forshallh President, April Reach Concepts, Inc. Title and Company MOTE: Signatures of all the inventory for Ssignous of record of the entire interest or their representative(s) are required. Supplik multiple forms of more than one eignature is required, see below. one forms are submitted. "Total of

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